

MAR 21 2006

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## FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
MAIL STOP RCE	Charles L. Miller
COMPANY:	DATE:
USPTO	March 21, 2006
FAX NO.:	TOTAL NO. OF PAGES: (including cover sheet)
(571) 273-8300	
Application Serial No.	OUR REFERENCE (C/M) NO.:
10/614,313	004770.00116

RE: In re: Appln. Of Pekonen  
Appln. No. 10/614,313  
Filed: July 7, 2003  
For: PROTOCOL USING FORWARD ERROR CORRECTION TO IMPROVE HANDOVER

## OFFICIAL FAX

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AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION and REQUEST FOR CONTINUED EXAMINATION

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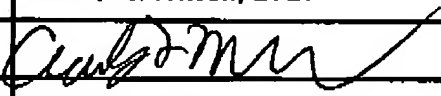
Approved for use through 07/31/2006; OMB 0651-0031

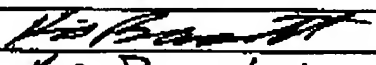
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/614,313
	Filing Date	July 7, 2003
	First Named Inventor	Pekonen
	Art Unit	2683
	Examiner Name	Huynh
Total Number of Pages in This Submission	Attorney Docket Number	004770.00116

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet RCE
<b>Remarks</b> The Commissioner is hereby authorized to charge any under payment of fees or credit any over payment of fees to Deposit Account Number 19-0733.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Charles L. Miller		
Date	March 21, 2006	Reg. No.	43,805

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	K. B. Baustert	Date	March 21, 2006

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MAR 21 2006

PTO/SB/17 (12-04v2)

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Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4618).**FEE TRANSMITTAL  
for FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 910.00)**Complete if Known**

Application Number	10/614,313
Filing Date	July 7, 2003
First Named Inventor	Pekonen
Examiner Name	Huynh
Art Unit	2683
Attorney Docket No.	004770.00116

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_☒ Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, LTD.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s)☒ Credit any overpaymentsUnder 37 CFR 1.16 and 1.17  
**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>		
Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>		
Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	_____	_____	_____	_____

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): RCB (\$790.00) and Extension of Time Fee (\$120.00)

**Fees Paid (\$)**

\$910.00

**SUBMITTED BY**

Signature

Registration No.  
(Attorney/Agent)

43,805

Telephone

312.463.5000

Name (Print/Type)

Charles L. Miller

Date

March 21, 2006

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